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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

APR 26 2016

Check if this is an amended filling.

JEFFREY P. ALLSTEADT, CLERK

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Identify Yourself			
1,	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Write the name that is on your	Maggie	
	government-issued picture identification (for example, your driver's license or	First name M	First name
	passport). Bring your picture	Middle name Spivey	Middle name
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., il, lit)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
poppines (14			
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>9 2 7 7</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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C	Deblor 1 Maggie First Name Midd	M. Spin		Case number (if known)
	rastingarie Mille	ile Name Last Name	3	
SSSCA		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4	4. Any business names and Employer Identification Numbers (EIN) you have used in	;	ed any business names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years Include trade names and	Business name		Business name
	doing business as names	Business name		Business name
		EIN	The state of the s	EIN
		EIN		EiN
5.	. Where you live			If Debtor 2 lives at a different address:
		714 E. 50th P		
		Number Street	t	Number Street
		Chicago	IL 60615	
		City Cook	State ZIP Code	City State ZIP Code
		County		County
		above, fill it in he	ddress is different from the one ere. Note that the court will send at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		n/a		<u> </u>
		Number Street		Number Street
		P.O. Box		P.O. Box
		City	State ZIP Code	City State ZIP Code
S.	Why you are choosing	Check one:	очения в под	Check one:
	this district to file for bankruptcy	Over the last 1 I have lived in other district.	80 days before filing this petition, this district longer than in any	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another (See 28 U.S.C	reason, Explain. . § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Maggie

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D	Pebtor 1 Maggie First Name Mid	M. Idle Name	Spivey Last Name		Case number (#	(known)
P	art 2: Tell the Court A	About Your	Bankruptcy Cas	se .		
7.	The chapter of the Bankruptcy Code you are choosing to file under	ior Ban	krupicy (Form 201)	escription of each, see <i>No</i> 0)). Also, go to the top of _i	tice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
		Cha	apter 12 apter 13			
8.	How you will pay the fo	loca you sub with	is court for more rself, you may pay mitting your pays a pre-printed ac	details about how you and with cash, cashier's ment on your behalf, you didress.	may pay. Typical check, or money our attorney may	neck with the clerk's office in your ally, if you are paying the fee or order. If your attorney is pay with a credit card or check option, sign and attach the ents (Official Form 103A).
		☑ I red By I less pay	quest that my fe aw, a judge may than 150% of th the fee in installi	ee be waived (You may , but is not required to, le official poverty line the	request this opt waive your fee, a nat applies to you his option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the
9.	Have you filed for bankruptcy within the last 8 years?	☑ No □ Yes.	District	When		Case number
	·		District	When	MM / DD / YYYY	Case number
			District	When	MM / DD / YYYY	Case number
i 0 .	Are any bankruptcy cases pending or being filed by a spouse who i not filing this case with you, or by a business partner, or by an affiliate?	s L Yes.		When		Relationship to you Case number, if known
						Relationship to you Case number, if known
1.	Do you rent your residence?	☑ No. ☐ Yes.	residence? No. Go to line	12. nitial Statement About an l ry petition.	Eviction Judgment	and do you want to stay in your Against You (Form 101A) and file it with

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btor 1 Maggie First Name Middle Ne	M.	Spivey Last Name	Case number (# known)
		A TAINE	
rt 3: Report About Any	Busines	ses You Own as a S	Sole Proprietor
Are you a sole proprietor of any full- or part-time	🛭 No.	Go to Part 4.	
business?	Yes	. Name and location of	business
A sole proprietorship is a business you operate as an			
ndividual, and is not a		Name of business, if any	
separate legal entity such as a corporation, partnership, or			
LC. f you have more than one		Number Street	
ole proprietorship, use a			
separate sheet and attach it of this petition.			
		City	State ZIP Code
		Check the appropriate	e box to describe your business:
			ess (as defined in 11 U.S.C. § 101(27A))
			Estate (as defined in 11 U.S.C. § 101(51B))
			efined in 11 U.S.C. § 101(53A))
			r (as defined in 11 U.S.C. § 101(6))
		☐ None of the above	
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see	most rea any of the	cent balance sheet, stat sese documents do not I am not filing under Ch	If you indicate that you are a small business debtor, you must attach your tement of operations, cash-flow statement, and federal income tax return or if exist, follow the procedure in 11 U.S.C. § 1116(1)(B). hapter 11. ter 11, but I am NOT a small business debtor according to the definition in
U.S.C. § 101(51D),		the Bankruptcy Code.	or 11, but I am 1401 a small business deplor according to the definition in
	☐ Yes.	I am filing under Chapt Bankruptcy Code.	ler 11 and I am a small business debtor according to the definition in the
14: Report if You Own	or Have .	Any Hazardous Pro	perty or Any Property That Needs Immediate Attention
o you own or have any	☑ No		
property that poses or is alleged to pose a threat		What is the hazard?	
of imminent and dentifiable hazard to bublic health or safety? Or do you own any			
property that needs		If immediate attention	is needed, why is it needed?
mmediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			The state of the s
ас поово игусти герапо!		Where is the property	2
			Number Street
			City State ZIP Code

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Debtor	- 1

Maggie

<u>M.</u>

Spivey

Case	number	(if known)	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- t received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
 - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
 - Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
 - I have a mental illness or a mental deficiency that makes me

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Maggie First Name Middle Nam	<u>M.</u>	Spivey Last Name	Case no	umber (il known)	· · · ·
Part 6:	Answer These Que	stions fo	or Reporting Purpo	oses		
Jou ha	u filing under er 7? I estimate that after empt property is	as 16b. Ar mo 16c. Sta	No. Go to line 16b. Yes. Go to line 17. Ye your debts prima mey for a business or i No. Go to line 16c. Yes. Go to line 17. Ate the type of debts your I am not filing under Chap	arily business debts? Busine investment or through the operation own that are not consumer delections. Chapter 7. Go to line 18.	ess debts are debts that you incurred to obtain ion of the business or investment.	and the contract of the contra
18. How m	any creditors do timate that you	1-49 50-9 100-	9 199	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	ACCOUNTS OF THE PARTY OF THE PA
19. How m estimat be wort	uch do you se your assets to th?	\$50.5 \$50.0 \$100	000 paggap pepundapan semanan semanan semanan penganjang pelangan bersaman semanan se	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 millio	sin	THE STATE ST
estimat to be?	uch do you e your liabilities sign Below	3 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	sn	debidentlemen error
For you		correct. If I have of title 11 under Ch If no atto this docu I request I underst with a ba 18 U.S.C	chosen to file under Cl t, United States Code. hapter 7. rney represents me an iment, I have obtained relief in accordance w and making a false sta	hapter 7, I am aware that I may p I understand the relief available und I did not pay or agree to pay so and read the notice required by with the chapter of title 11, United stement, concealing property, or coult in fines up to \$250,000, or impand 3571.	rjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 under each chapter, and I choose to proceed comeone who is not an attorney to help me fill out 11 U.S.C. § 342(b). States Code, specified in this petition. obtaining money or property by fraud in connection or isonment for up to 20 years, or both. Signature of Debtor 2 Executed on MM / DD / YYYYY	

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Deblor 1	Maggie First Name Middle Nam	M. Spivey	Case number (if known)
And the second second second			
bankrup attorney If you are an attorn	if you are filing this toy without an erepresented by sey, you do not lile this page.	themselves successfully. Because consequences, you are strongly ur To be successful, you must correctly file technical, and a mistake or inaction may dismissed because you did not file a rechearing, or cooperate with the court, case	e and handle your bankruptcy case. The rules are very / affect your rights. For example, your case may be quired document, pay a fee on time, attend a meeting or se trustee, U.S. trustee, bankruptcy administrator, or audit hat happens, you could lose your right to file another
		You must list all your property and debts court. Even if you plan to pay a particula in your schedules. If you do not list a del property or properly claim it as exempt, y also deny you a discharge of all your del case, such as destroying or hiding prope	in the schedules that you are required to file with the ar debt outside of your bankruptcy, you must list that debt bt, the debt may not be discharged. If you do not list you may not be able to keep the property. The judge can bts if you do something dishonest in your bankruptcy erty, falsifying records, or lying. Individual bankruptcy at if debtors have been accurate, truthful, and complete
		If you decide to file without an attorney, thired an attorney. The court will not treat successful, you must be familiar with the	the court expects you to follow the rules as if you had you differently because you are filing for yourself. To be United States Bankruptcy Code, the Federal Rules of softhe court in which your case is filed. You must also
		consequences?	s a serious action with long-term financial and legal
		☐ No ☑ Yes	
		Are you aware that bankruptcy fraud is a inaccurate or incomplete, you could be fit No Yes	serious crime and that if your bankruptcy forms are ned or imprisoned?
		Did you pay or agree to pay someone wh ☐ No ☑ Yes. Name of Person	Veronica Eason er's Notice, Declaration, and Signature (Official Form 119).
		have read and understood this notice, and	lerstand the risks involved in filing without an attorney. I d I am aware that filing a bankruptcy case without an or property if I do not properly handle the case.
		× M.	×
		Signature of Debtor 1 Date 4/25/16 MM / DD / YYYY	Signature of Debtor 2 Date MM / DD / YYYY
		Contact phone <u>773 - 580 - 93</u>	_
		Cell phone	Ceil phone
O CARANTOS CONTRACTOS CONTRACTOR CONTRACTOS CONTRACTOS CONTRACTOS CONTRACTOR		Email address Spimag 31 (a)	<u>'Email</u> address

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Fill in this	information to ide	ntify your case:		
Debtor 1	Maggie	М.	Spivey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filir	ng) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court fo	r the: Northern District o	f Illinois	
Case numbe	(If known)		·	

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your as Value of	sets what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$_	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,590.00
1c. Copy line 63, Total of all property on Schedule A/B	\$_	12,590.00
art 2: Summarize Your Liabilities	···	···
		abilities Lyou owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	11,690.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	190,801.00
Your total liabilities	\$	202,491.00
art 3: Summarize Your Income and Expenses	 	
Schedule I: Your Income (Official Form 106I)	\$	796.00
Copy your combined monthly income from line 12 of Schedule I		

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Debtor 1

Document Spivey Page 9 of 58 Maggie First Name Case number (if known)_

P	art 4: Answer These Questions for Administrative and Statistical Record	ls				
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes					
7.	 What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 					
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	s 196.00				
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following:	Total claim				
	9a. Domestic support obligations (Copy line 6a.)	\$				
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$				
	9d. Student loans. (Copy line 6f.)	\$6,773.00				
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00				
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00				
	9g. Total. Add lines 9a through 9f.	\$6,773.00				

Fill in this information to identify your case and this filing:								
Debtor 1	Maggie	М.	Spivey					
	First Name	***************************************	Middle Name	Last Name				
Debtor 2								
(Spouse, if filin	g) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the: Northern District of Illinois								
Case number								

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of th portion you own?	
Land Investment property Timeshare			
	the entireties, or a life		
Debtor 1 only			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co (see instructions)	mmunity property	
Other information you wish to add about this it property identification number:	tem, such as local		
What is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any secure	d claims on Schedule D:	
☐ Condominium or cooperative ☐ Manufactured or mobile home	entire property?	portion you own?	
	\$	\$ 0.0	
Timeshare Other	interest (such as fee s	simple, tenancy by	
Who has an interest in the property? Check one.			
Debtor 1 only Debtor 2 only	parents.	mmunity property	
	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this in property identification number: □ What is the property? Check all that apply. □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Who has an interest in the property? Check one. □ Debtor 1 only	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: □ What is the property? Check all that apply. □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Other □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Check if this is co (see instructions) □ Check i	

Desc Main

Filed 04/26/16 Entered 04/26/16 15:39:54 Document Page 11 of 88 number (if known)_ Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home n/a Creditors Who Have Claims Secured by Property. 1.3. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative portion you own? entire property? Manufactured or mobile home 0.00 0.00 Land Investment property Describe the nature of your ownership ZIP Code City State ☐ Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1, Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ✓ Yes Chevy Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1. Make: the amount of any secured claims on Schedule D: Malibu Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only 2011 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? 120,000 Approximate mileage: At least one of the debtors and another Other information: 11,690.00 11.690.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Current value of the Current value of the Year: Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions)

Case 16-14189 Doc 1 Filed 04/26/16 Entered 04/26/16 15:39:54 Desc Main Pirst Name Middle Name Last Name Document Page 12 of as 8 number (if known).

~ w*********	rgg maderling for a green on springholic grid, maps, of places line do a substitute spring from a securitarist or which at a bit of a state or a sum annual securitarist or which at a bit of a state or a sum annual securitarist or which at a bit of a state or a sum annual securitarist or which at a bit of a state or a sum annual securitarist or which at a bit of a state or a sum annual securitarist or a sum and a	ton bandarketa ara dhisside a a bissilia, an an ta "maark fermahandi da kaparting shekemaa arakan da ada ala dha ammengana kata ta ana (muu ta ghun) balbin ta a		eganggayay an diagaasii ahan maana yaraamanan maana dha bira angayay anad adhaamaa maani Baraa ah a
3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	aims or exemptions. Put
	Model:	Debtor 1 only	Creditors Who Have Clai	ms Secured by Property.
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
	**	At least one of the debtors and another		
	Other information:	☐ Check if this is community property (see	\$0.00	\$ 0.00
		instructions)		
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl	
J.7.	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
		Debtor 2 only	r, many, state of the modern Domes School Sc	
	Year:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	☐ At least one of the debtors and another	entire property	portion you own
	Other information:	☐ Check if this is community property (see	\$ 0.00	\$0.00
		instructions)		
□ N □ Y	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	ed claims on Schedule D:
lf you 4.2.	www. or have more than one, list here: Make: Model:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	Year:	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$0.00	\$0.00
. Add you l	the dollar value of the portion you own for have attached for Part 2. Write that numbe	r all of your entries from Part 2, including any entrie	es for pages	\$11,690.00

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Part 3: Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	-
Yes. Describe Furniture	\$500.00
 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games 	
☑ No ☐ Yes, Describe	\$
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
Yes. Describe	\$\$
9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
☑ No □ Yes. Describe	\$\$
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	\$
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe	\$ 400.00
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
☑ No ☐ Yes, Describe	\$
13. Non-farm animals Examples: Dogs, cats, birds, horses	
☑ No ☑ Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	And of the second secon
No Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3, Write that number here	\$900.00
	in the second se

Part 4:

Describe Your Financial Assets

Do you own or have any	legal or equitable interest in	any of the following?	Current val portion you Do not deduc or exemptions	i own? secured claims
16. Cash				
	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petition		
☑ No ☐ Yes		Cash;	\$	0.00
			···	
		unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.	S,	
No No				
Yes		Institution name:		
	17.1. Checking account:		_ \$	0.00
	17.2. Checking account:	97-00-00-00-00-00-00-00-00-00-00-00-00-00	_ \$	0.00
	17.3, Savings account:		_ \$	0.00
	17.4. Savings account:		- \$	0.00
	17.5. Certificates of deposit:		- \$	0.00
	17.6. Other financial account:		- \$	0.00
	17.7. Other financial account:		- \$	0.00
	17.8. Other financial account:		- \$	0.00
	17.9. Other financial account:		- \$	0.00
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts		
			\$	0.00
	**************************************		_ \$	0.00
			- \$	0.00
19. Non-publicly traded s an LLC, partnership, a ☑ No		rated and unincorporated businesses, including an interest in % of ownership:		
Yes. Give specific information about			\$	0.00
them			\$	0.00
		<u>U%</u> %	\$	0.00
		<u> </u>	\$	<u> </u>

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20 Government and corr	orate bonds and other negotiable and non-negotiable instruments		
Negotiable instruments	include personal checks, cashiers' checks, promissory notes, and money orders.		
Non-negotiable instrum	ents are those you cannot transfer to someone by signing or delivering them.		
☑ No			
Yes. Give specific information about	Issuer name:	e	0.00
them		· · · · · · · · · · · · · · · · · · ·	0.00
		Ψ	0.00
21. Retirement or pension	accounts RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or pro	fit charing plans	
No	to, Enton, neogri, 40 (k), 400(b), trint savings accounts, or other perision of pro	nt-snamy plans	
Yes. List each			
account separately.	Type of account: Institution name:		
	401(k) or similar plan:	<u> </u>	0.00
	Pension plan:	\$	0.00
	IRA:	\$	0.00
	Retirement account:	\$	0.00
	Keogh:	<u> </u>	0.00
	Additional account:	\$	0.00
	Additional account:	\$	0.00
	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunication		
No No			
Q Yes	Institution name or individual:		
	Electric:	*	0.00
	Gas:	 \$	0.00
	Heating oil:	<u> </u>	0.00
	Security deposit on rental unit:	\$	0.00
	Prepaid rent:	\$	0.00
	Telephone:		0.00
	Water:	\$	0.00
	Rented furniture:	\$	0.00
	Other:	\$	0.00
23. Annuities (A contract fo	a periodic payment of money to you, either for life or for a number of years)		
☑ No			
☐ Yes	Issuer name and description:		
		\$	0.00
		\$	0.00
			0.00

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First Name	IVI. Middle Name	Last Nan	LICCHMONE	Page 16 of Page number (if known)	

26 U.S.C. §§ 530(b)(1), 52	IRA, in an account in a qualified ABLE program, or under a qual 9A(b), and 529(b)(1).	lified state tuition progra	m.	
☑ No				
☐ Yes	Institution name and description. Separately file the records of a	nv interests.11 U.S.C. & 52	21(c)·	
	, , ,	,	- 1(0)	0.00
	0.00		\$	0.00
		***************************************	\$	0.00
			\$ <u></u>	0.00
25. Trusts, equitable or future exercisable for your bene	e interests in property (other than anything listed in line 1), and r fit	rights or powers		
☑ No				
Yes. Give specific		·	7	
information about them			\$	0.00
26. Patents, copyrights, trade Examples: Internet domain ☑ No ☐ Yes. Give specific information about them	emarks, trade secrets, and other intellectual property names, websites, proceeds from royalties and licensing agreements		•	0.00
momadon dode arciji			\$	0.00
 27. Licenses, franchises, and Examples: Building permits No Yes. Give specific information about them. 	exclusive licenses, cooperative association holdings, liquor licenses	s, professional licenses		0.00
miormation about them.			\$	0.00
Money or property owed to y				
	ou?		portion 5 Do not de	value of the you own? duct secured exemptions.
28. Tax refunds owed to you	ou?		portion 5 Do not de	you own? duct secured
28. Tax refunds owed to you ☑ No			portion 5 Do not de	you own? duct secured exemptions.
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific inform about them, includi	nation ng whether	Federal:	portion 5 Do not de	you own? duct secured exemptions.
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific inform about them, including you already filed the	nation ng whether e returns	Federal: State:	portion 5 Do not de	you own? duct secured exemptions. 0.00 0.00
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific inforn about them, includi	nation ng whether e returns		portion 5 Do not de	you own? duct secured exemptions.
28. Tax refunds owed to you No Yes. Give specific inform about them, including your already filed the and the tax years.	nation ng whether e returns sum alimony, spousal support, child support, maintenance, divorce s	State: Local: settlement, property settlen Alimony: Maintenance:	portion Do not de claims or a	you own? duct secured exemptions. 0.00 0.00 0.00 0.00
28. Tax refunds owed to you No Yes. Give specific inform about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lump	nation ng whether e returns sum alimony, spousal support, child support, maintenance, divorce s	State: Local: Settlement, property settlent Alimony: Maintenance: Support:	portion Do not de claims or a	90u own? duct secured exemptions. 0.00 0.00 0.00 0.00 0.00 0.00 0.00
28. Tax refunds owed to you No Yes. Give specific inform about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lump	nation ng whether e returns sum alimony, spousal support, child support, maintenance, divorce s	State: Local: Settlement, property settlent Alimony: Maintenance: Support: Divorce settlement:	portion Do not de claims or a	0.00 0.00 0.00 0.00 0.00 0.00 0.00
28. Tax refunds owed to you ✓ No ✓ Yes. Give specific inform about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lump ✓ No ✓ Yes. Give specific inform 60. Other amounts someone of Examples: Unpaid wages, directly because of the social Security beconomic security of the social security because of the social sec	sum alimony, spousal support, child support, maintenance, divorce station	State: Local: Settlement, property settlement: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion Do not de claims or a \$ \$ \$ ment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	90u own? duct secured exemptions. 0.00 0.00 0.00 0.00 0.00 0.00 0.00
28. Tax refunds owed to you ✓ No → Yes. Give specific inform about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lump ✓ No → Yes. Give specific inform 60. Other amounts someone of Examples: Unpaid wages, directly be not social Security be not security	sum alimony, spousal support, child support, maintenance, divorce station	State: Local: Settlement, property settlement: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion Do not de claims or a \$ \$ \$ ment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00
28. Tax refunds owed to you ✓ No ✓ Yes. Give specific inform about them, including your already filed the and the tax years. 29. Family support Examples: Past due or lump ✓ No ✓ Yes. Give specific inform 60. Other amounts someone of Examples: Unpaid wages, directly because of the social Security beconomic security of the social security because of the social sec	sum alimony, spousal support, child support, maintenance, divorce station	State: Local: Settlement, property settlement: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion Do not de claims or a \$ \$ \$ ment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00

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er de santes en America de la combacto manga prompte mente en espera de la companie de la companie de la compa	man and a state of the state of	$\cdots \cdots $	e, e	
31. Interests in insurance policies				
	ice; health savings account (HS	A); credit, homeowner's, or renter's insurance		
☑ No☑ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender	or refund value:
			. \$	0.00
	,		\$	0.00
			\$	0.00
32. Any interest in property that is due you if you are the beneficiary of a living trust, e property because someone has died.No		rance policy, or are currently entitled to receive		
Yes. Give specific information			7.	0.00
			\$	0.00
33. Claims against third parties, whether or Examples: Accidents, employment disputeNo	es, insurance claims, or rights to	• •		
Yes. Describe each claim			\$	0.00
34. Other contingent and unliquidated claim to set off claims № No	ns of every nature, including o	counterclaims of the debtor and rights		
Yes, Describe each claim			s	0.00
L.			Ψ	
35. Any financial assets you did not already	' list			
No Yes. Give specific information				0.00
Tes. Give specific information	A SAN		\$	0.00
36. Add the dollar value of all of your entrie	s from Part 4, including any e	ntries for pages you have attached	s	0.00
			L	
	arra gaga garanum mungan ngam magan pungan ngatah Ada Jambundh Phambab Adale mela Jacob Jacob Jacob Agan		and Andrews Standard and A. Marine, Andrews Services	and and hadron add anno and hadrone an adversion to the hadrone of dead and
Part 5: Describe Any Business-F	Related Property You O	wn or Have an Interest in. List any i	eal estate	e in Part 1.
37. Do you own or have any legal or equitab	ele interest in any business-re	lated property?		
No. Go to Part 6.				
Yes. Go to line 38.			<u> </u>	
			Current val portion you Do not deduc or exemption	J own? It secured claims
38. Accounts receivable or commissions yo	u already earned			:
☑ No			7	
☐ Yes, Describe			\$	0.00
20 Office equipment furnishing and	lice			
 Office equipment, furnishings, and supp Examples: Business-related computers, software 		chines, rugs, telephones, desks, chairs, electronic devices	s	
☑ No			<u> </u>	
Yes, Describe			\$	0.00
A STATE OF THE STA			I	

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade			
☑ No			
☐ Yes. Describe		\$	0.00
41. Inventory			
₩ No	St. read Pr. buff annual St. behala harmadd I yw'r o chael chap bd a bd	Manage of the same	
Yes. Describe		\$	0.00
	***************************************		-
42. Interests in partnerships or joint ventures			A Parent
☑ No			
Non-Bosseite	nership:		
76 OF ON	%	r	0.00
	[/] /	Φ	0.00
	_^ %	\$	0.00
	_,,	V	
43. Customer lists, mailing lists, or other compilations			
☑ No			
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?			
☐ No ☐ Yes. Describe	·		Audients (Charles
Tes. Describe		\$	0.00
			PATRICIA DE LA CALIFORNIA DE LA CALIFORN
44. Any business-related property you did not already list			dependent to the se
☑ No			The second secon
Yes. Give specific information		\$	0.00
		\$	0.00
		\$	0.00
		¢	0.00
		Φ	0.00
		\$	0.00
		\$	0,00
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached		e	0.00
for Part 5. Write that number here	→	<u> </u>	
	a, a a a a a a a a a a a a a a a a a a	manus mandres alum missi si	non a decrease had not see a mark in the high
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Infifyou own or have an interest in farmland, list it in Part 1.	terest In	1.	
n you own or have an interest in farmland, not their art i.			
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?			
₩ No. Go to Part 7.			
☐ Yes. Go to line 47.		a di anno a la della discolario	s in a mean valorimental.
		Current value	
		portion you o	
		Do not deduct se or exemptions.	
47. Farm animals			V V
Examples: Livestock, poultry, farm-raised fish			i
☑ No		ח	
☐ Yes			
		\$	0.00
	T		1

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48. Crops—either growing or harvested			
✓ No ☐ Yes. Give specific information		\$	0.00
49. Farm and fishing equipment, implements, machinery, fixture No Yes	s, and tools of trade		
		\$	0.00
50. Farm and fishing supplies, chemicals, and feed No Yes		······································	
		\$	0.00
51. Any farm- and commercial fishing-related property you did not	ot already list		To any other state of the state
Yes. Give specific information		\$	0.00
52. Add the dollar value of all of your entries from Part 6, includi	ng any entries for pages you have attached	\$	0.00
	an Interest in That You Did Not List Above		
53. Do you have other property of any kind you did not already li Examples: Season tickets, country club membership	st?		
No Yes. Give specific		\$	0.00
information		\$	0.00
		Ψ	0.00
54. Add the dollar value of all of your entries from Part 7. Write th	at number here	\$	0.00
Part 8: List the Totals of Each Part of this Form		an Abanghan i manamah Abana ata i 1996 a 19 km 28	CONTROL OF THE OWNER OF THE PERSON OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OWNER OWNER OWNER OWNER
55. Part 1: Total real estate, line 2		\$	0.00
56. Part 2: Total vehicles, line 5	<u>\$11,690.00</u>	*	3. III
57. Part 3: Total personal and household items, line 15	\$		
58. Part 4: Total financial assets, line 36	\$		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$		or the second process of the second process
61. Part 7: Total other property not listed, line 54	+\$		e Colita i vivinar e pres
62. Total personal property. Add lines 56 through 61	\$Copy personal property total	+\$	12,590.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$	12,590.00

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Debtor 1	Maggie	M.	Spivey			
	First Name		Middle Name	Last Name	***************************************	
Debtor 2 Spouse, if filing)	First Name		Middle Name	Last Name		
Jnited States I	Bankruptcy Cou	ert for the:North	nern District of Illino	s		
Case number (If known)	***************************************		1			Check amende

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: **Identify the Property You Claim as Exempt**

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	2011 Chevy Malibu	\$ <u>4,624.00</u>	□ \$ 2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B:	3.1		☑ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Household Goods	\$ <u>500.00</u>	Ø \$ 500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	6		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Clothings	\$ <u>400.00</u>	Ø \$ 400.00	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	

Are you claiming a homestead exemp	iption of more than \$160,375?
--	--------------------------------

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☑ No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - Ø No
 - Yes

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Fill in this in	nformation to ide	ntify your case:		
Debtor 1	Maggie	М	Spivey	
DODIO!	First Name	Middle Name	Lest Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of I	Ilinois	
Case number (If known)	***************************************			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - 🔲 No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor ha	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Do not de	t of claim	2001-03/20/20/20	e of collateral supports this	Column C Unsecured portion If any
All Steel Credit Union	Describe the property that secures the claim:	s1	1,690.00	\$	11,690.00	_{\$0.0}
Creditor's Name 1 W Merchants Number Street						
Oswego IL 60543 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
 ☑ Debtor 1 only ☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☑ Check if this claim relates to a community debt 	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number 9 2 7 7					
² NA	Describe the property that secures the claim:	\$	0.00	\$	0.00	0.0
Creditor's Name		1				
Number Street						
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) 					
community debt Date debt was incurred	Last 4 digits of account number					

Case 16-14189 Doc 1 Filed 04/26/16 Entered 04/26/16 15:39:54 Desc Main Page 22 of 58 Document Fill in this information to identify your case: Maggie Debtor 1 Spivey First Name Middle Nami Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois • Case number Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** amount amount n/a Last 4 digits of account number 0.00 \$ 0.00\$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another ☐ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated Other, Specify □ No Yes n/a 0.00_s 0.00 s Last 4 digits of account number 0.00 Priority Creditor's Name When was the debt incurred? Number Strect As of the date you file, the claim is: Check all that apply. Contingent Slate ZIP Code Unliquidated ■ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated

☐ No ☐ Yes

Is the claim subject to offset?

Other, Specify

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Maggie First Name

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Document

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Debtor 1

Case number (if known)

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Part 2: List All of Your NONPRIORITY Unsecured Claims

		·····						
3.	Do any creditors have nonpriority ur							
	No. You have nothing to report in the Yes							
	even in the second of the seco			y a Militar and contract of the annual contract of the contrac	No.			
4.	nonpriority upsecured claim list the cre	l claims in	the alphabet	ical order of the creditor who holds each claim. If a creditor has	s more t	han one		
	included in Part 1. If more than one cre-	ditor holds	atety for each a particular cla	claim. For each claim listed, identify what type of claim it is. Do no aim, list the other creditors in Part 3.If you have more than three no	i list clair	ms already		
:	claims fill out the Continuation Page of	Part 2.		The state of the s	a iba ioi ity	y urisecureo		
					8 025/97/6/1979	ero Postato e Garanga e Espa		
	1				Total	l claim		
.1	Ally Financial			Last 4 digits of account number 9 2 7 7				
	Nonpriority Creditor's Name				\$	16,650.00		
	PO Box 380901			When was the debt incurred? 06/10/2008				
	Number Street			TOTAL MARKANA.				
	Bloomington	MN	55438					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.			Contingent				
	Debtor 1 only			Unliquidated				
				☐ Disputed				
	Debtor 2 only							
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			Student loans				
	☐ Check if this claim is for a commu	nity deht		Obligations arising out of a separation agreement or divorce				
		y dobt		that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	i			
	☑ No			✓ Other Specify Auto				
	☐ Yes							
2	A L	MCC-42-DEBICENDAMENTAL COLORONS SOLIC	ountroous/mediatriklaskt-królo-4/4/090		enmonterralmetralizations	2,208.00		
-4	Acceptance Now			Last 4 digits of account number 9 2 7 7	\$	2,208.00		
	Nonpriority Creditor's Name			When was the debt incurred? 05/18/2013				
	5501 Headquarters							
	Number Street	***************************************	, , , , , , , , , , , , , , , , , , , ,	THERMORE				
	Plano	TX	75024	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	Contingent				
	Who incurred the debt? Check one.			☐ Unliquidated		and the state of t		
	and the second s			Disputed				
	Debtor 1 only Debtor 2 only			_ 5.00.00		8 2 3		
				Type of NONPRIORITY unsecured claim:		The state of the s		
	Debtor 1 and Debtor 2 only							
	At least one of the debtors and another			☐ Student loans		100		
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		H Major		
				Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?			Other. Specify Rental Agreement				
	☑ No			Carlet. Specify Tromas 7 (groother)				
	Yes	COMMERCIAL PROPERTY OF STREET	menteren menteran menteran in de la primita de primita de la primita de la primita de la primita de la primita			Million M. Grant (1904) jauntuvasid talat (1909) jauntuvasid (1909)		
3	US Dept of Education			Last 4 digits of account number 9 2 7 7		4 070 00		
	Nonpriority Creditor's Name			00/05/0044	\$	1,273.00		
	2401 International POB 7859			When was the debt incurred? $02/05/2014$		T. Company		
	Number Street			WATER AND ADDRESS OF THE ADDRESS OF				
	Madison	WI	53704					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		· Wedgen"; or		
	Mho incurred the debt? Obest and			☐ Contingent		W 1974		
	Who incurred the debt? Check one.			Unliquidated		AV.		
	Debtor 1 only			☐ Disputed				
	Debtor 2 only			·				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		:		
	At least one of the debtors and another			☑ Student loans		444		
	☐ Check if this claim is for a commun	ity deht				and the state of t		
		iiry uest		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		Part I		
	☑ No			Other. Specify		COMPA ACMAN		
	☐ Yes			— Outon opening		is the administration		

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Debtor 1

M.

Case number (if known)

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Davine Family Medicin	e		Last 4 digits of account number 9 2 7 7	
Nonpriority Creditor's Name 2040 Ogden			When was the debt incurred? 06/04/2013	\$
Number Street Aurora	IL	60504	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Chec Debtor 1 only Debtor 2 only	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim is for a sthe claim subject to offset? No Yes	community debt		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical 	
Oswego Public Library onpriority Creditor's Name	APT-ARTHUR CONTENSES	ord manifestant and market of consection with the second number of the consection of the second number of the consection of the second number of the second	Last 4 digits of account number 9 2 7 7	\$
2 Jefferson St			When was the debt incurred? 12/01/2014	
umber Street Dswego	IL	60543	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
Ino incurred the debt? Check Debtor 1 only Debtor 2 only	one.		☐ Unliquidated☐ Disputed☐ Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a the claim subject to offset?			Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
No Yes			Other. Specify Library Fees	
Omcast oppriority Creditor's Name			Last 4 digits of account number 9 2 7 7	\$ <u>7</u>
O Box 3002			When was the debt incurred? 03/10/2015	
mber Street Outheastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
y	State	ZIP Code	Contingent Unliquidated	
ho incurred the debt? Check of Debtor 1 only	one.		☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a c the claim subject to offset?	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cable	

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Case number (# known)

Maggie

Middle Name

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Part 2:

Il Dent of Human				4077032004408006
IL Dept of Human Serv Nonpriority Creditor's Name	ices	-	Last 4 digits of account number 9 2 7 7	s 5,5
509 S. Sixth St			When was the debt incurred? 01/09/2014	· · · · · · · · · · · · · · · · · · ·
Number Street Springfield	IL	62701	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? Chec	k one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
□ Debtor 1 and Debtor 2 only□ At least one of the debtors an	d on ather		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	_	t	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
ls the claim subject to offset? ☑ No	•		Other. Specify	
Yes				
	oraken A. voortsuurssansta viita vootsuurse korjungan Armailianse A.	en simply to him to the size of the Anni Anni source and the size of the size		misertholismisprimesmotratismise
Rush Copley Medical Consprintly Creditor's Name	enter		Last 4 digits of account number 9 2 7 7	s <u>21,15</u>
2000 Ogden Ave			When was the debt incurred? 01/20/2012	
Aurora	IL	60504	As of the date you file, the claim is: Check all that apply.	
ly	State	ZIP Code	Contingent	
Vho incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
the claim subject to offset?	community dept		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other. Specify Medical	
Yes				
S Cellular	and constructive of the land of the section of the construction of the land of	tendar enversament i konstitut Licitus; no constitut kilologisen eta sekuali	Last 4 digits of account number 9 2 7 7	s890
npriority Creditor's Name			······································	
ept 0205 mber Street			When was the debt incurred? 04/02/2011	
alatine	IL	60055	As of the date you file, the claim is: Check all that apply.	
Ą	State	ZIP Code	☐ Contingent	
no incurred the debt? Check o	ne.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other, Specify Cellular	
No Yes				

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Debtor 1

Maggie

M. Middle Name Spivey Document

Case number (if known)_

Part 2:

0				V20030302141(8)3
─ Convey at Fox Valley			Last 4 digits of account number 9 2 7 7	s 3,533.0
Nonpriority Creditor's Name 2160 Walcott Rd			When was the debt incurred? 08/07/2012	4 212 201
Number Street Aurora	IL	60504	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and ano			Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a com Is the claim subject to offset? ☑ No ☐ Yes	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Residential Apartments	
1 Kane Law Magistrate Court	ding disenting on the control of the		Last 4 digits of account number 9 2 7 7	\$ 2,239.0
Nonpriority Creditor's Name 540 S. Randall Rd			When was the debt incurred? 03/01/2016	
Number Street Geneva	IL	60134	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and anot			Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a coming the claim subject to offset? ☑ No ☐ Yes	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Landlord	
	enn en compos en	tanka kalannak eti tisan eti ele elektrik eti elektrik eti elektrik eti elektrik eti elektrik eti elektrik eti	Last 4 digits of account number 9 2 7 7	_{\$} 2,186.0
Kendall Law Magistrate Nonpriority Creditor's Name 807 W. John St			When was the debt incurred? 03/01/2016	
Number Street Yorkville	IL	60560	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent Untiquidated	
Who incurred the debt? Check one.			Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and anoth	ner		Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a comm	nunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No ☐ Yes			Other, Specify Landlord	

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Debtor 1

Middle Name

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u.		4.	

Afte	er listing any entries on this page, number t	nem beginning wit	th 4.4, followed by 4.5, and so forth.	Total clain
5.3			The state of the contract and the state of t	
	Ghaly Neurosurgical Associates Nonpriority Creditor's Name		Last 4 digits of account number 9 2 7 7	\$ 272.6
	4260 Westbrook Dr #127		When was the debt incurred? 11/17/2009	
	Number Street Aurora IL	60504	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community deb Is the claim subject to offset? ☑ No ☐ Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
5.4	Valley Imaging Consultants	ari in reservicio de la secución de Artista de Frenches de como como de Artista de Artis	Last 4 digits of account number 9 2 7 7	
	Nonpriority Creditor's Name			\$ <u>604.0</u>
	2000 Ogden Ave	**************************************	When was the debt incurred? 03/01/2016	
	Aurora IL	60504	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one. description of the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt Is the claim subject to offset?		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
	Mo □ Yes			
.5	Winfield Padialogy Consultants	guard state constant parts assert the state of	Last 4 digits of account number 9 2 7 7	\$51.00
Ī	Winfield Radiology Consultants Nonpriority Creditor's Name		When was the debt incurred? 11/12/2014	
	25 N Winfield Rd Number Street			
_	Winfield IL City State	60190	As of the date you file, the claim is: Check all that apply.	
	·	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of MONDBIODITY was a small state.	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
į	At least one of the debtors and another	•	Student loansObligations arising out of a separation agreement or divorce that	
Į	Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offset?		Other. Specify Medical	
_	☑ No ☑ Yes			

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Case number (if known)

Maggie

М.

Spivey Last Name

Part 2:

Direct Tv			Last 4 digits of account number 9 2 7 7	## # # # # ## ## ## ## ## ## ## ## ## #
Nonpriority Creditor's Name PO Box 9001069			When was the debt incurred? 03/01/2016	s <u>500</u>
Number Street				
Louisville City	KY	40290	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
☐ Check if this claim is for is the claim subject to offset ☑ No ☐ Yes	a community debt		 Obligations arising out of a separation agreement or divorce the you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Utility</u> 	
US Bank Nonpriority Creditor's Name	connecessary and relative of a separate construction and the service of the separate construction and the separate constructio	one manufacture de la companya de la	Last 4 digits of account number 9 2 7 7	\$ <u>3,000</u>
PO Box 1800			When was the debt incurred? 03/01/2016	
Number Street Saint Paul	MN	55101	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Chec Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this claim is for a s the claim subject to offset? No Yes	ed another a community debt		 ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Banking 	
Bank of America	NOT AND THE OWN OF THE PROPERTY OF THE PROPERT	n Ambreon ver ver und de securitario	Last 4 digits of account number 9 2 7 7	\$ <u>3,000</u>
PO Box 15168			When was the debt incurred? 03/01/2016	
Vilmington	DE State	19850 ZIP Code	As of the date you file, the claim is: Check all that apply. — Contingent	
Who incurred the debt? Check	cone.		Unliquidated Disputed	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Banking	

Case 16-14189

M.

Maggie

Spivey Document

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Case number (if known)

Part 2:

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Sprint			Last 4 digits of account number 9 2 7 7	s 3,0
Nonpriority Creditor's Name			When was the debt incurred?	\$_3,0
6391 Sprint Parkway			when was the nept included t	
Overland Park	KS	66251	As of the date you file, the claim is: Check all that apply.	
Oity Who incurred the debt? Check ☐ Debtor 1 only	State one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and	l anathau		☐ Student loans	
Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?	community debt		Debts to pension or profit-sharing plans, and other similar debts	
No			Other. Specify	
Yes				
ΓMobile	man on the control of	Andrew (Marie Co.) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944)	Last 4 digits of account number 9 2 7 7	\$ <u>1,0</u>
Conpriority Creditor's Name O Box 53410			When was the debt incurred? 03/01/2016	
Number Street Bellevue	WA	98015	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Mha inaumad the debta of the			Unliquidated	
Who incurred the debt? Check Debtor 1 only	one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and	another		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
Z No			☑ Other. Specify Cellular	
Yes	DDD-0446 Street Middlestrated - to convey a reconstruction of the contract of			
Chex System			Last 4 digits of account number 9 2 7 7	\$ 5,00
onpriority Creditor's Name			When was the debt incurred? 03/01/2016	
508 S. Hudson Rd		***************************************		
Voodberry	MN	55125	As of the date you file, the claim is: Check all that apply.	
ty	State	ZIP Code	Contingent	
The incurred the debt? Check of	one.		☐ Unliquidated☐ Disputed	
Debtor 1 only			- Sisperior	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other, Specify Collection	

Case 16-14189

Spivey

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Case number (if known)

Maggie M.

Part 2:

				1919/25190	959K
Nicor Nonpriority Creditor's Name			Last 4 digits of account number 9 2 7 7	e	8
PO Box 0632			When was the debt incurred? 03/01/2016	₽	
Number Street Aurora	IL	60507	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check o			Uniquidated		
Debtor 1 only	ile.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and a	nother		 Obligations arising out of a separation agreement or divorce that 		
Check if this claim is for a co	mmunity deb	t	you did not report as priority claims		
is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Utility		
☑ No			Other, Specify Others		
Yes					
ComEd	and an an an annual before the state of the		Last 4 digits of account number 9 2 7 7	\$	8
Nonpriority Creditor's Name			When was the debt incurred? 03/01/2016	*	
PO Box 6111			when was the debt incurred?		
Carol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check on	e.		Unliquidated		
Debtor 1 only	.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and an	other		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a co	nmunity debt		you did not report as priority claims		
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Utility		
I No			Other: Specify Others		
Yes		entroduction of the immediate production of the control of the con			
Department of Finance			Last 4 digits of account number 9 2 7 7	\$5	50
onpriority Creditor's Name O Box 4641			When was the debt incurred? 03/01/2016		
umber Street Chicago	IL	60680	As of the date you file, the claim is: Check all that apply.		
ty	State	ZIP Code	Contingent		
New teaching that the second			Unliquidated		
ho incurred the debt? Check one			☐ Disputed		
Debtor 1 only Debtor 2 only			Time of MONDPIODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and and	ther		Student loans		
Check if this claim is for a com	munity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 		
the claim subject to offset?			Other. Specify Tickets		
No					

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Debtor 1

Maggie

Middle Name

Spivey Document

Case number (if known)

Part 2:

Village of Aurora Nonpriority Creditor's Name			Last 4 digits of account number 9 2 7 7	s 300.6
44 E. Downers Place			When was the debt incurred? 03/01/2016	¥
Number Street Aurora	IL	60505	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a comm			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset? ☑ No ☐ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tickets	
Central Dupage Hospital Nonpriority Creditor's Name	0.000 p. 100		Last 4 digits of account number 9 2 7 7	<u>\$ 100,00</u>
25 North Winfield Road			When was the debt incurred? 03/01/2016	·
Winfield	IL	60190	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	er		Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a commi	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ✓ No ☐ Yes			Other. Specify Medical	
Моль в от	OMOPHIZONES PERSONAL PROPERTY OF A STATE OF THE STATE OF	ten fant til storf en	Last 4 digits of account number 9 2 7 7	\$_5,500.0
Waubonsee Community Colle Nonpriority Creditor's Name 18 River St.	ege		When was the debt incurred? 03/01/2016	
Number Street	11	00500	As of the date you file, the claim is: Check all that apply.	
Aurora City	State	60506 ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated	
Debter 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a commu	inity debt		Debts to pension or profit-sharing plans, and other similar debts	
ls the claim subject to offset? ☑ No □ Yes			Other. Specify	

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Debtor 1

Maggie Μ First Name Middle Name

Part	2:

				,	
ΓJC Apartments & Invest	ments Prope	erties	Last 4 digits of account number 9 2 7 7	_{\$} 10	,000.0
Ionpriority Creditor's Name 1485 Illinois-71			When was the debt incurred? 03/01/2016		
lumber Street Dswego	iŁ	60543	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Vho incurred the debt? Check of	nne		Unliquidated		
Debtor 1 only	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other, Specify Former Landlord: Tom Cook		
Z No					
Yes		aan saamas oo ka			n de la constante de la consta
n/a			Last 4 digits of account number	\$	0.0
onpriority Creditor's Name			When was the debt incurred?		
umber Street			As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
un - 1			Unliquidated		
Who incurred the debt? Check o	ne.		☐ Disputed		
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims		
s the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify		
□ No					
Yes					
	LOCAMINA SANCING MENERAL MENER	A POLÍTICO CONTERMISMO A POLITICO DE ACTUAL DE	Last 4 digits of account number	\$	0.0
I/a onpriority Creditor's Name					
- Companyor of the comp			When was the debt incurred?		
umber Street			As of the date you file, the claim is: Check all that apply.		
İty	State	ZIP Code	Contingent		
Who incurred the debt? Check o	ne		☐ Unliquidated☐ Disputed		
Debtor 1 only	.,		□ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
the claim subject to offset?			Other. Specify		
-			1 (

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Debtor 1

Maggie First Name

М

Spivey

Document

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ter listing any entries on this pa	ige, number the	m beginning witl	n 4.4, followed by 4.5, and so forth.	Tota	l claim
Chex System			Last 4 digits of account number 9 2 7 7	\$	0.0
Nonpriority Creditor's Name 7805 Hudson Rd			When was the debt incurred? 03/01/2016		
Number Street Woodberry City	MN State	55125 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		
Who incurred the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	one.		□ DisputedType of NONPRIORITY unsecured claim:□ Student loans		
☐ At least one of the debtors and☐ Check if this claim is for a distinct the claim subject to offset?☐ No			Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Old Accounts		
Equifax Bankruptcy Dep	t.		Last 4 digits of account number 9 2 7 7	\$	0.0
P.O. Box 740241			When was the debt incurred? 03/01/2016		
Number Street Atlanta City Who incurred the debt? Check	GA State	30374 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a claim is the claim subject to offset? ☑ No ☐ Yes	community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only		
And the state of t	grafine de la maria de la m	near men mengalah perhapa perhapa penangan perhapa penangan penangan penangan penangan penangan penangan penang	Last 4 digits of account number 9 2 7 7	\$	0.0
Experian Bankruptcy De Nonpriority Creditor's Name P.O. Box 2002	pt.		When was the debt incurred? 03/01/2016		
Number Street Allen City	TX State	75013 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans		
☐ At least one of the debtors and ☐ Check if this claim is for a distribution is the claim subject to offset?			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only 		

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Debtor 1

Maggie First Name

М

Spivey

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e way to the age of the bound o	Total claim
After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.	
Last 4 digits of account number 9 2 7 7	0.00
→ Trans Union Bankruptcy Dept.	0.00
Nonpriority Creditor's Name When was the debt incurred? 03/01/2016	
P.O. Box 1000 Number Street As of the date you file, the claim is: Check all that apply.	
Number Street Chester PA 19022 As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Contingent	
Who incurred the debt? Check one. Unliquidated Disputed	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ Student loans	
☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that	
you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	
☑ No	
☐ Yes	
	www.common.proportrace.common.proportrace.com
Last 4 digits of account number 9 2 7 7	0.00
Certegy Check Service	·
Nonpriority Creditor's Name When was the debt incurred? 03/01/2016	
P.O. Box 30046 Number Street As of the date you file, the claim is: Check all that apply.	
Tampa FL 33630 As of the date you like, the date is a last oppy	
City State ZIP Code Contingent	
Who incurred the debt? Check one. Unliquidated Disputed	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ Student loans	
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that	
you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset? Other. Specify Notice Only	
₩ No	
☐ Yes	
Last 4 digits of account number	B
A STATE OF THE STA	
Nonpriority Creator's Name When was the debt incurred?	
Number Street As of the date you file, the claim is: Check all that apply.	
700-4	
City State ZIP Code Contingent Unliquidated	
Who incurred the debt? Check one.	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce that	
you did not report as priority claims	
Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	
□ No □ Yes	

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Maggie Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

11.1		•	ve more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Unique National Collect	ion		On which entry in Part 1 or Part 2 did you list the original creditor?
119 E Maple Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Jeffersonville	IN	47130	Last 4 digits of account number 9 2 7 7
mentalin king i a timber menerati mentata etastin teranin-terani dalimetra a stimi terratira terbis etasti man Mentalin king i a timber menerati mentata etastin terani	State	ZIP Code	
Convergent Outsourcing)		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 9004			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Priority Unsecured Claims
			Claims Claims
Renton	WA		Last 4 digits of account number 9 2 7 7
at the age of the first the second	State	ZIP Code	Complete Control of the Control of t
Harvard Collection Servi	ices		On which entry in Part 1 or Part 2 did you list the original creditor?
4839 N Elston			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	IL	60630	Last 4 digits of account number 9 2 7 7
City man firms a strike company of entire entropic temperatures company of the entropic of the	State	ZIP Code	Last 4 digits of account number 3 2 1
Diversified Services			On which entry in Part 1 or Part 2 did you list the original creditor?
1824 W Grand Ave 200			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	IL	60622	Last 4 digits of account number 9 2 7 7
ity waana waa ka waxaa k	State	ZIP Code	Last 4 digits of account number 3 2 1 1
Fair Collections and Out			On which entry in Part 1 or Part 2 did you list the original creditor?
12304 Baltimore Ave E			
umber Street		-	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
3eltsville	MD	20705	0 0 7 7
tiA	State	ZIP Code	Last 4 digits of account number 9 2 7 7
Diversified Consultants			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 551268			
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville	FL	32255	0 2 7 7
it A	State	ZIP Code	Last 4 digits of account number 9 2 7 7
ATG Credit LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
ame 20 Pay 14905			
O Box 14895 umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			☑ Part 2: Creditors with Nonpriority Unsecured Claims
			(Janua)
Chicago	IL.	60614	

State

Last 4 digits of account number 9 2 7 7

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Debtor 1

Maggie First Name

Spivey

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	Total cialm	6,773.00
Total claims from Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim \$ \$	6,773.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority		**************************************	
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 	6g.	*	0.00

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Fill in this in	nformation to ide	entify your case:		
Debtor	Maggie	M	Spivey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District o	of Illinois	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - W No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
 example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
 unexpired leases.

	Person o	r company wit	h whom you	have the contract or lease	State what the contract or lease is for
2.1	n/a Name				
de Artegologies de Calendar (april 1980) (al 1980)	Number	Street	, .		
2.2	City	Activities with the second sec	State	ZIP Code	
	Name				
***************************************	Number City	Street	State	ZIP Code	
2.3	Name				
	Number	Street	w-10-11-11-11-11-11-11-11-11-11-11-11-11-		
2.4	City	and the reserve and a second and the second and the second	State	ZIP Code	
	Name				
	Number City	Street	State	ZIP Code	
2.5	Name		A. 116. W. + To-7		
	Number	Street			
	City	Salara and a	State	ZIP Code	andere Gregoria de production de la companya

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Fill in this i	nformation to ic	dentify your case:		
Debtor 1	Maggie First Name	M Middle Name	Spivey Last Name	
Debtor 2 (Spouse, if filing		Middle Name	Last Name	
		for the: Northern District o	f Illinois	
Case number	r			

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	have any codebtors? (If you are filing a joint case, do no	ot list either spouse as a codebtor.)
No No		
Yes		rty state or territory? (Community property states and territories include
Arizona,	a, California, Idaho, Louisiana, Nevada, New Mexico, Puer	to Rico, Texas, Washington, and Wisconsin.)
	Go to line 3.	
Yes.	s. Did your spouse, former spouse, or legal equivalent live	with you at the time?
		must be a second of the second
.	Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State	ZIP Code
In Colur	mn 1, list all of your codebtors. Do not include your sp	pouse as a codebtor if your spouse is filing with you. List the person
SROWN	in line 2 again as a codebtor only if that person is a g	uarantor or cosigner. Make sure you have listed the creditor on
Schedu	ule D (Official Form 106D), Schedule E/F (Official Form	uarantor or cosigner. Make sure you have listed the creditor on 106E/F), or Schedule G (Official Form 106G). Use Schedule D,
Schedu	in line 2 again as a codeptor only it that person is a gule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	106E/F), or Schedule G (Official Form 106G). Use Schedule D,
Schedu Schedu	ule D (Official Form 106D), Schedule E/F (Official Form	106E/F), or Schedule G (Official Form 106G). Use Schedule D,
Schedu Schedu	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	106E/F), or Schedule G (Official Form 106G). Use Schedule D,
Schedu Schedu	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	106E/F), or Schedule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the det
Schedu Schedu Colum	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	column 2: The creditor to whom you owe the det
Schedu Schedu Colum n/a	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line
Schedu Schedu Colum n/a Name	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the det Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedu Schedu Colum n/a Name	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Schedu Schedu Colum n/a Name Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor or Street State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line
Schedu Schedu Colum n/a Name Numbe City Name	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor BY Street State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule G, line Schedule D, line
Schedu Schedu Colum n/a Name Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor BY Street State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line
Schedu Schedu Colum n/a Name Numbe City Name	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor BY Street State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line ZIP Code Schedule D, line Schedule D, line Schedule E/F, line Schedule D, line
Schedu Schedu Colum n/a Name Numbe City Name	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line
Schedu Schedu Colum n/a Name Numbe City Name Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. 10 1: Your codebtor er Street State State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule E/F, line Schedule E/F, line Schedule B, line
Schedu Schedu Colum n/a Name Numbe City Name Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. 10 1: Your codebtor er Street State State	Column 2: The creditor to whom you owe the del Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line
Schedu Schedu Colum n/a Name Numbe City Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. 10 1: Your codebtor er Street State State	Column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the creditor to whom you owe the creditor to whom you owe the description of the creditor to whom you owe the creditor to whom you owe the creditor to whom you owe the creditor
Schedu Schedu Colum n/a Name Numbe City Name Numbe	ule D (Official Form 106D), Schedule E/F (Official Form ule E/F, or Schedule G to fill out Column 2. 10 1: Your codebtor er Street State State	Column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the column 2: The creditor to whom you owe the description of the creditor of the cred

Case 16-14189 Doc 1 Filed 04/26/16 Entered 04/26/16 15:39:54 Desc Main Page 39 of 58 Document Fill in this information to identify your case: Maggie Debtor 1 Spivev Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois • Check if this is: (fi known) An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 106I MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. **Describe Employment** Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with **Employment status** ☐ Employed information about additional Employed employers. Not employed ■ Not employed Include part-time, seasonal, or self-employed work. n/a Occupation Occupation may include student or homemaker, if it applies. Employer's name Employer's address Number Street Number State ZIP Code State ZIP Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. 0.00 0.00 3. Estimate and list monthly overtime pay. 0.00 4. Calculate gross income. Add line 2 + line 3.

Debtor 1

Case 16-14189 Doc 1 Filed 04/26/16 Entered 04/26/16 15:39:54 Desc Main Page 40 of 58 Maggie Case number (if known) Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here..... 0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 0.00 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5¢. 5d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5q. 5h. Other deductions. Specify: 5h. 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 8b. Interest and dividends 8b. 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 80 0.00 8d. Unemployment compensation 8d. 8e. Social Security Яe. 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 196.00 8f. 8g. Pension or retirement income 0.00 8g. 8h. Other monthly income, Specify: Daughter & Son 8h. 600.00Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 196.00 9. 10 Calculate monthly income. Add line 7 + line 9. 796.00 0.00 796.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Food Stamps 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 796.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined

monthly income

13. Do you expect an increase or	decrease within the y	year after you	file this form?
	-	·	

M No.

Yes. Explain:

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Fill	in this information to identif	y your case:				
Deb		M. Spivey				
Deb	First Name	Middle Name Last Name	Check if			
)	use, if filing) First Name	Middle Name Last Name	,	mended f	-	
Unite	ed States Bankruptcy Court for the	Northern District of Illinois			showing post of the following	petition chapter 13 g date:
	e number lown)		MM /	DD / YYYY	dd While What we have	
Offi	icial Form 106J		,,,,,			
Sc	hedule J: Yo	ur Expenses				12/15
mtorn	nation, if more space is need own). Answer every question		ing together, both are equally n. On the top of any additiona	responsi I pages, v	ble for supply rite your nam	ing correct
dilinia de la constanta de la	his a joint case?					
	No. Go to line 2.					
	Yes. Does Debtor 2 live in a	separate household?				
	☐ No ☐ Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2	<u>'</u>		
2. Do	you have dependents?	an marten arrant recommendate and reference and recommendate and the state of the s		*		
	not list Debtor 1 and otor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Olystanatur u	Dependent's age	Does dependent live with you?
Do i	not state the dependents' nes.	,	Son		20	□ No ☑ Yes
			<u>n/a</u>)	 No □ Yes
			n <u>/a</u>)	ઇ No □ Yes
			n <u>/a</u>)	 No ☐ Yes
			n/a)	☑ No □ Yes
exp	your expenses include enses of people other than rself and your dependents?	☑ No □ Yes				
Part 2	Estimate Your Ongo	ing Monthly Expenses				
expen	ate your expenses as of you	bankruptcy filing date unless you a skruptcy is filed. If this is a suppleme	re using this form as a supple ental Schedule J, check the bo	ement in a	Chapter 13 c	ase to report and fill in the
		n-cash government assistance if you			v	
		d it on Schedule I: Your Income (Offi			Your exper	1S6S
any	rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	4.	\$	0.00
	ot included in line 4:					0.00
4a.	Real estate taxes	ontov'a inc. van		4a.	\$	0.00
4b. 4c.	Property, homeowner's, or r	The second secon		4b.	\$	0.00
4c. 4d.	Home maintenance, repair, Homeowner's association or	, ,		4c.	\$	0.00 0.00
→ U,	FIGUREOWITERS ASSOCIATION OF	CONCOMMENTAL CUES		4d.	an a	U.UU

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Debtor 1

Maggie

М.

Last Name

Middle Name

Spivey

Case number (if known)

Your expenses 0.00 Additional mortgage payments for your residence, such as home equity loans **Utilities:** Electricity, heat, natural gas 0.00 6a. Water, sewer, garbage collection 6b. 0.00 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. 50.00 6c. 6d Other, Specify: 0.00 6d Food and housekeeping supplies 50.00 7. Childcare and children's education costs 0.00 8. Clothing, laundry, and dry cleaning 25.00 9. Personal care products and services 25.00 10. Medical and dental expenses 0.00 11. Transportation. Include gas, maintenance, bus or train fare. 0.00 Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 0.00 13. Charitable contributions and religious donations 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 0.00 15a. 15b. Health insurance 0.00 15b. 15c. Vehicle insurance 120.00 15d. Other insurance, Specify: n/a 0.00 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 16 Installment or lease payments: 350.00 17a. Car payments for Vehicle 1 17a. 0.00 17b. Car payments for Vehicle 2 17b 17c. Other. Specify: n/a 0.00 0.00 17d. Other, Specify: n/a 17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 0.00 Other payments you make to support others who do not live with you. Specify: n/a 0.00 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a. Mortgages on other property 20a. 0.00 20b. Real estate taxes 20b. 0.00 20c. Property, homeowner's, or renter's insurance 20c. 0.00 Maintenance, repair, and upkeep expenses 20d. 0.00 20e. Homeowner's association or condominium dues 20e.

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Debtor 1		M.	Spivey	Case number (if known)		
	First Name	Middle Name Last	Name	-		
at Oth	ner. Specify: <u>n/a</u>	A		. 2	:1、 + \$	0.00
2 Cal	culate your mon	nthly expenses.				
22a	. Add lines 4 thro	ugh 21.		22	a. \$	620.00
22t	. Copy line 22 (m	onthly expenses for Debt	or 2), if any, from Official Form	106J-2 22	b. \$	0.00
220	. Add line 22a an	d 22b. The result is your i	monthly expenses.	22	c. \$	620.00
23. Calc	ulate your mont	hly net income.			.	796.00
23a.	Copy line 12 (y	our combined monthly inc	come) from Schedule I.	23	ia. \$_	7 30.00
23b.	Copy your mon	thly expenses from line 2	2c above.	23	b\$_	620.00
23c.		nonthly expenses from yo	ur monthly income.		· ·	176.00
	The result is yo	our monthly net income.		23	c	
o Deu	rou aynaat ay iy		idhi. dh	face and file also forms 2		
		_	our expenses within the year a	-		
		· -	your car loan within the year or cause of a modification to the ter			
	10.					
Q Y	es. Explain h			and manufactures and a second sec		
	: : :					
	: :					1
	1					

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Debtor 1	Maggie	M.	Spivey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for	the: Northern District o	f Illinois	Ţ
				- Constituted in

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

id you pay or agree to pay s	someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
No Yes. Name of person	Veronica Eason	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
nder penalty of perjury, I de at they are true and correct	clare that I have read the summary an	nd schedules filed with this declaration and
	\supset	
M. Signature of Debtor 1	Signature of	

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Fill in this	information to ide	ntify your case:		
Debtor 1	Maggie	М	Spivey	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for	the: Northern District of	Illinois	
Case number	er	*************************************		

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

Give Details About Your Marital Status and Where You Lived Before

Ø	ring the last 3 years, have No Yes. List all of the places ye	- •	·		
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
				☐ Same as Debtor 1	Same as Debtor 1
	Number Street		From To	Number Street	From
	City	State ZIP Code		City State ZIP Code	
				☐ Same as Debtor 1	Same as Debtor 1
	Number Street		From	Number Street	From To
	City	State ZIP Code		City State ZIP Code	
	•				

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	Maggie First Name		Vey Name	Case nui	mber (if known)	······································
D:-			of or from anomalisms to	seinnee during this wa-	or the two previous calc	ndar veare?
Fill in	the total amou	int of income you receive	nt or from operating a bit d from all jobs and all bus ome that you receive toge	inesses, including part-tir		nuai years r
	lo 'es. Fill in the d	etails.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until led for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$0.00	Wages, commissions, bonuses, tipsOperating a business	\$
	For last calend	dar vear:	Wages, commissions,	42.000.00	☐ Wages, commissions,	
		December 31,2015	bonuses, tips Operating a business	\$ 43,000.00	bonuses, tips Operating a business	\$
ſ	For the calend	lar year before that:	Wages, commissions, bonuses, tips	\$ 35,000,00	Wages, commissions, bonuses, tips	
((January 1 to D	ecember 31,2014	Operating a business	\$ 35,000.00	Operating a business	\$
Includ unem gamb	de income rega nployment, and pling and lottery	ardless of whether that ind other public benefit payn y winnings. If you are filing	nents; pensions; rental inc g a joint case and you hav	s of other income are aling come; interest; dividends; e income that you receive	nony; child support; Social s money collected from laws ed together, list it only once	uits; royalties; and
Include unem gamb	de income regan ployment, and pling and lottery each source and	ardless of whether that ind other public benefit payn winnings. If you are filing d the gross income from o	come is taxable. Example: nents; pensions; rental inc	s of other income are aling come; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	uits; royalties; and
Include unem gamb	de income regan ployment, and pling and lottery each source and	ardless of whether that ind other public benefit payn winnings. If you are filing d the gross income from o	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of other income are aling come; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	uits; royalties; and
Include unem gamb	de income regan ployment, and pling and lottery each source and	ardless of whether that ind other public benefit payn winnings. If you are filing d the gross income from o	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav each source separately. C	s of other income are aling come; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	e under Debtor 1. Gross Income from each source
Includ unem gamb List e	de income regan ployment, and pling and lottery each source and do es. Fill in the d	ardless of whether that ind other public benefit payn y winnings. If you are filing d the gross income from e etails.	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav each source separately. C Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions) 196.00	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions an exclusions)
Include unem gamb List e	de income reganoloyment, and oling and lottery each source and to each source and each source and each source and each source and each each source and each each each each each each each each	ardless of whether that ind other public benefit payn winnings. If you are filing d the gross income from o	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions) 196.00	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions an exclusions)
Include unem gamb List e	de income reganoloyment, and oling and lottery each source and to each source and each source and each source and each source and each each source and each each each each each each each each	ardless of whether that ind other public benefit payn winnings. If you are filing d the gross income from a etails.	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of Income Describe below. Food Stamps	Gross Income from each source (before deductions and exclusions) 196.00	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions an exclusions)
Include unem gamb	de income reganoloyment, and oling and lottery each source and to each source and each source and each source and each source and each each source and each each each each each each each each	ardless of whether that ind other public benefit payn winnings. If you are filing the gross income from eatils.	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of Income Describe below. Food Stamps	Gross Income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross Income from each source} \text{(before deductions and exclusions)} \end{array}	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions an exclusions)
Include unem gamb	de income reganoloyment, and oling and lottery each source and to es. Fill in the different January the date you for last calen	ardless of whether that ind other public benefit payn winnings. If you are filing the gross income from eatils.	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of Income Describe below. Food Stamps	Gross Income from each source (before deductions) \$\frac{196.00}{5} = \frac{196.00}{5} =	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)
Include unem gamb	de income reganoloyment, and oling and lottery each source and to es. Fill in the different January the date you for last calen	ardless of whether that ind other public benefit payn winnings. If you are filing the gross income from eatils. 1 of current year until filed for bankruptcy:	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of income Describe below. Food Stamps	Gross Income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross Income from each source} \text{(before deductions and exclusions)} \end{array}	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)
Include unem gamb	de income reganoloyment, and oling and lottery each source and to each each each each each each each each	ardless of whether that ind other public benefit payn winnings. If you are filing the gross income from eatils. 1 of current year until filed for bankruptcy:	come is taxable. Example: nents; pensions; rental inc g a joint case and you have each source separately. C Debtor 1 Sources of income Describe below. Food Stamps	Gross Income from each source (before deductions) \$\frac{196.00}{5} = \frac{196.00}{5} =	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions and exclusions)

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Debtor 1

Maggie First Name Last Name Spivey

Case number (if known)

e eith	ner Debtor 1's or Debtor 2's debts primarily	consumer dehts?							
	•		sumar dahta ara	dofinad in 1	1112C & 1017	(R) ac			
r INO.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?								
	No. Go to line 7.								
	Yes. List below each creditor to whom you total amount you paid that creditor. E child support and alimony. Also, do r	Do not include payments to	or domestic sup	port obligation	ns, such as				
	* Subject to adjustment on 4/01/19 and every	3 years after that for cas	es filed on or afte	er the date o	f adjustment.				
Yes	. Debtor 1 or Debtor 2 or both have primarily	y consumer debts.							
	During the 90 days before you filed for bankru		ditor a total of \$6	300 or more?	?				
	No. Go to line 7.								
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payment	r domestic support obliga	tions, such as ch	ild support a	ind				
		Dates of Total all payment	nount paid	Amount yo	u still owe	Was this payment for			
	August 1000	\$	0.00	\$	0.00	☐ Mortgage			
	Creditor's Name					☐ Car			
	Number Street	***************************************				Credit card			
						Loan repayment			
						Suppliers or vendo			
	City State ZIP Code								
	City State ZIP Code		0.00	gastana a 1974 agada 1 a 8 Nos a 8 nos a 101 a		Suppliers or vendo			
	City State ZIP Code Creditor's Name	\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage			
		\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car			
		<u> </u>	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car Credit card			
	Creditor's Name	\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car Credit card Loan repayment			
	Creditor's Name	\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo			
	Creditor's Name	\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo			
	Creditor's Name Number Street	\$	0.00	\$	0.00	Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo			
	Creditor's Name Number Street City State ZIP Code	\$ \$ \$	0.00		0.00	Suppliers or vendo Other Mortgage Car Credit card			
	Creditor's Name Number Street					Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other			
	Creditor's Name Number Street City State ZIP Code					Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage			
	Creditor's Name Number Street City State ZIP Code Creditor's Name					Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendo Other Mortgage			
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Spivey___

otor 1	Maggie First Name Milds	M dle Name Last Name	Spivey		•	Case nun	nber (# known)	
Insid corp ager	ders include your related orations of which you	are an officer, director, per business you operate as a	relatives of any	general por owner o	artners; pa f 20% or n	artnersh nore of t	ips of whic heir voting	who was an insider? th you are a general partner; securities; and any managing r domestic support obligations,
Ø i	No							
<u> </u>	Yes. List all payments	to an insider.	Dates of payment	Total paid	amount	Amou owe	nt you still	Reason for this payment
					0.00		0.00	
	Insider's Name		· · · · · · · · · · · · · · · · · · ·	\$	0.00	\$	0.00	
	Number Street							
	City	State ZIP Code		Artistica supremi	·····		***************************************	and the second s
		***************************************	_	\$	0.00	\$	0.00	
	Insider's Name							
	Number Street							
	City	State ZIP Code	_					
an ir Inclu L	nsider? de payments on debt lo	filed for bankruptcy, did s guaranteed or cosigned be that benefited an insider.		S88, 621 AAst	or transf		roperty o	n account of a debt that benefited Reason for this payment Include creditor's name
			20 Til general general Agus ann		0.00	\$	0.00	A Indiana Grand of Harris
	Insider's Name		**************************************	\$		Ф		
	Number Street							
							and the second	
	City	State ZIP Code	_				to the second second	
***	egyayayay amiy gayayaa a a a a a a a a a a a a a a a						:	
	Insider's Name			\$	0.00	\$	0.00	
	Number Street						1	
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Desc Main

Debtor 1

Maggie M Spivey
First Name Middle Name Last Name

Case number (if known)____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **⊠** No Yes. Fill in the details. Court or agency Nature of the case Status of the case Pending Case title Court Name On appeal Concluded Number Street Case number City ZIP Code Pending Case title Court Name On appeal ☐ Concluded Number Street Case number City ZiP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Mo. Go to line 11. Yes. Fill in the information below. Value of the property Describe the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City Property was attached, seized, or levied. State ZIP Code Describe the property Date Value of the property Cn 9 2 Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. ZIP Code Property was attached, seized, or levied.

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or 1	Maggie	M	Spivey	Case number (if known)
	First Name	Middle Name Last Na	ame	
Nit	hin 90 days befo	re vou filed for bankrup	tcv, did any creditor, includi	ng a bank or financial institution, set off any amounts from your
acc	counts or refuse t	o make a payment beca	ause you owed a debt?	•
	No			
	Yes. Fill in the de	tails.		
			Describe the action the credite	or took Date action Amount
				was taken
	Creditor's Name			
	Number Street			\$ 0.00
	Number Street			
			_	
	City	State ZIP Code	Last 4 digits of account num	ber: XXXX
		en 1 e 2 l		in the procession of an assigned for the benefit of
Wit	thin 1 year before	you filed for bankrupto	todian, or another official?	in the possession of an assignee for the benefit of
	No	politica receiver, a cas	tourist, or arrown or	
	Yes			
_				
rt !	List Certain	n Gifts and Contribut	ions	
Wit	hin 2 years befor	e you filed for bankrupt	cy, did you give any gifts wit	th a total value of more than \$600 per person?
Z	No			
	Yes. Fill in the de	tails for each gift.		
		and a state of the		Dates you gave Value
	Gifts with a total	value of more than \$600	Describe the gifts	the gifts
				\$0.0C
	Person to Whom You	Save the Gift		
				\$
	Number Street			
	City	State ZIP Code		
	Person's relationshi	n to vou		
			The state of the s	And the programmer of the control of
	Gifts with a total v	alue of more than \$600	Describe the gifts	Dates you gave Value
	per person	Alega Andrews (1994)	Time and the state of the second seco	the gifts
				\$ 0.0
	Person to Whom You (Gave the Gift		Ψ
				\$ 0.00

	Number Street		· !	
			:	
	City	State ZIP Code	:	
	manual of the first	in to your	· 	
	Person's relationshi	p to you		A Company of the Comp

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Spivey

1	Maggie M First Name Middle Name	Last N	Spivey	Case number (if known)_			
/it	nin 2 years before you filed for b	ankrupi	cy, did you give any gifts or o	ontributions with a total valu	ie of more than \$60	00 to any	charity?
	No Yes. Fill in the details for each gift	or contr	ibution.				
	Gifts or contributions to charities that total more than \$600		Describe what you contributed		Date you contributed	Value	
	Charity's Name					\$	0.00
						\$	0.00
	Number Street	The state of the s					
	City State ZIP Code						
6	List Certain Losses						
it	hin 1 year before you filed for ba	nkrupto	y or since you filed for bankr	uptcy, did you lose anything	because of theft, f	ire, other	
isa	aster, or gambling?						
1	No					•	
_							
J	Yes. Fill in the details.						
		MENTE			Application and the second	1	1
	Describe the property you lost and		Describe any insurance covera	ge for the loss	Date of your	Value of p	property
	how the loss occurred		Include the amount that insurance	has paid. List pending insurance	loss	lost	
			claims on line 33 of Schedule A/B				
-		,			T		
-						\$	0.00
-						·	
-				**************************************			
	<u>an ann a</u> gann meagan ag a tagang ta nag katan ay tagan ng mgang _{an} 12st atau na ata sa tagang Maka katan	A 70. A. A. A					
7	List Certain Payments or	Trans	fers				
itl	nin 1 year before you filed for ba	nkruptc	y, did you or anyone else acti	ng on your behalf pay or trar	sfer any property	to anyone)
	consulted about seeking bankru						
cli	ide any attorneys, bankruptcy petit	ion prep	arers, or credit counseling age	ncies for services required in yo	our bankruptcy.		
1	No						
]	Yes. Fill in the details.		N. A. CANADA SA MARABATAN MANADA ANA ANA ANA ANA ANA ANA ANA ANA AN	en er er er en	The state of the s	e villa Nota vizin	s Pausata
			Description and value of any pr	operty transferred	Date payment or		of paymen
	Midwest Consultants Group) Inc			transfer was	1.377	
	Person Who Was Paid		Droporation of Dankers		made		
	9212 S. Stony Island Ave		Preparation of Bankrupto	y documents			
	Number Street				03/21/2016	\$	100.00
					Altagorous a	¢	0.00
	Chicago IL 606	17				Φ	
	City State ZIP C				MATERIAL STATES		
	J., J.				- Periodical and the second and the		
	Paralla and the same of the sa				***************************************		
	Email or website address				The state of the s		
	Person Who Made the Payment if Not You				-		

Maggie

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Page 52 of 58 Document Spivey Maggie Case number (if known) Debtor 1 Last Name Date payment or Amount of Description and value of any property transferred transfer was made payment 001 Debtorcc.com Credit Counseling Person Who Was Paid 14.95 03/21/2016 372 Summit Ave Number Street Jersey City 07306 ZIP Code State www.debtorcc.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **☑** No Yes. Fill in the details. Amount of payment Description and value of any property transferred Date payment or transfer was made Person Who Was Paid 0.00 Number Street 0.00 City ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **Ø** No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer or debts paid in exchange was made transferred Person Who Received Transfer Number Street ZIP Code State Person's relationship to you

Cliv

Person Who Received Transfer

Person's relationship to you _

State

ZIP Code

Number Street

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	Maggie First Name	Middle Name	M	ast Name	Spivey	Case number (if know	rn)	
	Filst (Yallie	Middle Name	L	apt Maisin				
	in 10 years befor a beneficiary? (T					erty to a self-settled trust	or similar device of v	vhich you
Z					,			
	es. Fill in the det	ails.						
				17/97	otion and value of the pro			
				Desciil.	Mon and value of the pro	perty transierreu		Date transfer was made
				:				
N	lame of trust							
_			***************************************		en en all Nellen II (Nellen de Mercadaulten Propriet als val vorde en de Roman des anno advances			
					and the state of t	***************************************		
8:	List Certain	Financial	Accoun	its, Instru	ments, Safe Depos	t Boxes, and Storage	Units	
ith	in 1 year before	you filed fo	r bankru	ptcy, were a	any financial accounts	or instruments held in yo	our name, or for your	benefit,
256	ed, sold, moved,	or transfer	red?			-	-	
						tificates of deposit; share	es in banks, credit un	ions,
	-	ension fun	ds, coope	eratives, as	sociations, and other	inancial institutions.		
N	lo 'es. Fill in the de	talia						
···								
ΙY	es. riii in the qe	tans.				7 (<u>Security) are proposed in the control of the co</u>	BARRING GALINARIOS.	
ΙY	es. Fill in the ge	talis.		Last 4	digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance befor closing or transfer
ΙY	es. riii in the ge	talis.		Last 4	digits of account number		一次是大大学的大学中国的特殊的大学和特殊的大学的一种的大学的大学的大学的一个一个	and the state of t
	es. Fill in the de				digits of account number		closed, sold, moved,	and the state of t
ì	Name of Financial Ins					instrument	closed, sold, moved,	closing or transfer
ì						Instrument Checking	closed, sold, moved,	closing or transfer
ì	Name of Financial Ins					Instrument Checking Savings	closed, sold, moved,	closing or transfer
	Name of Financial Ins	ititution	ZIP Code			Instrument Checking Savings Money market	closed, sold, moved,	closing or transfer
	Name of Financial Ins Number Street	ititution	ZIP Code		**************************************	Instrument Checking Savings Money market Brokerage	closed, sold, moved,	\$ 0.0
-	Name of Financial Ins Number Street	stitution State	ZIP Code		**************************************	Instrument Checking Savings Money market Brokerage Other Checking	closed, sold, moved,	closing or transfer
	Name of Financial Ins Number Street City Name of Financial Ins	stitution State	ZIP Code		**************************************	Instrument Checking Savings Money market Brokerage Other Checking Savings	closed, sold, moved,	\$ 0.0
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	Name of Financial Ins Number Street City Name of Financial Ins	stitution State	ZIP Code		**************************************	Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved,	\$ 0.0
i	Name of Financial Ins Number Street City Name of Financial Ins	State	ZIP Code		**************************************	Instrument Checking Savings Money market Brokerage Other Checking Savings Money market	closed, sold, moved,	\$ 0.0
i	Name of Financial Ins Number Street City Name of Financial Ins	State			**************************************	Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved,	\$ 0.0
ý yc	Name of Financial Ins Number Street City Name of Financial Ins Number Street City Du now have, or	State State State did you have	ZIP Code ve within	XXX		Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved, or transferred	\$ 0.0
i yo	Name of Financial Ins Number Street City Name of Financial Ins Number Street City Ou now have, or	State State State did you have	ZIP Code ve within	XXX		Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved, or transferred	\$ 0.0 \$ 0.0
i i ye cui	Name of Financial Ins Number Street City Name of Financial Ins Number Street City ou now have, or of or	State State did you have ther valuab	ZIP Code ve within	XXX		Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved, or transferred	\$ 0.0 \$ 0.0
i i i v cui	Name of Financial Ins Number Street City Name of Financial Ins Number Street City Ou now have, or	State State did you have ther valuab	ZIP Code ve within	XXXX-		Instrument Checking Savings Money market Brokerage Other Checking Savings Money market Brokerage	closed, sold, moved, or transferred	\$ 0.0 \$ 0.0
i i i i i i	Name of Financial Ins Number Street City Name of Financial Ins Number Street City ou now have, or of or	State State did you have ther valuab	ZIP Code ve within	XXXX	ore you filed for bankru	Instrument Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Other	closed, sold, moved, or transferred	\$ 0.0
i i i i i	Name of Financial Ins Number Street City Name of Financial Ins Number Street City ou now have, or of or	State State did you have ther valuab	ZIP Code ve within	XXXX	ore you filed for bankruse had access to it?	Instrument Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Other	closed, sold, moved, or transferred	\$ 0.0 \$ 0.0 \$ 0.0
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o ye ecui	Name of Financial Ins Number Street City Name of Financial Ins Number Street City Du now have, or rities, cash, or	State State did you have ther valuabetails.	ZIP Code ve within	XXXX- XXXX- 1 year before	ore you filed for bankruse had access to it?	Instrument Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Other	closed, sold, moved, or transferred	\$ 0.0 \$ 0.0 \$ 0.0
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Debtor 1	Maggie	М		Spivey	Case number (if known)
	First Name	Middle Name	Last Name		

22. Have you stored property in a storage u	nit or place other than your home within 1	year before you filed for bankruptcy?	
Yes. Fill in the details.			
	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		□ No □ Yes
Number Street	Number Street		### T
	City State ZIP Code		
City State ZIP Code		anger or design and a second contract of the c	
Part 9: Identify Property You Hol	d or Control for Someone Else		
23. Do you hold or control any property that or hold in trust for someone. Yellow No.	t someone else owns? Include any prope	rty you borrowed from, are storing for,	
Yes. Fill in the details.	Where is the property?	Describe the property	Value VANA
Owner's Name	-		\$
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		
City State ZIP Code Part 10: Give Details About Enviro	nmental Information	The second section of the second section is a second section of the second section of the second section section is a second section of the second section sec	
For the purpose of Part 10, the following de	efinitions apply:		
	tate, or local statute or regulation concerr or material into the air, land, soil, surface lling the cleanup of these substances, wa	water, groundwater, or other medium,	
Site means any location, facility, or proputilize it or used to own, operate, or utili	perty as defined under any environmental ze it, including disposal sites.	law, whether you now own, operate, or	
Hazardous material means anything an esubstance, hazardous material, pollutan		s waste, hazardous substance, toxic	
Report all notices, releases, and proceeding	gs that you know about, regardless of who	en they occurred.	
24. Has any governmental unit notified you t	that you may be liable or potentially liable	under or in violation of an environmental la	w?
✓ No ✓ Yes. Fill in the details.			
	Governmental unit Envi	ronmental law, if you know it C	Pate of notice
Name of site	Governmental unit		
Number Street	Number Street		
	_ City State ZIP Code		
City State ZIP Code	-		

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Case number (if known)_

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Spivey

Maggie First Name

No			
Yes. Fill in the details.			
	Governmental unit Enviror	nmental law, if you know it	Date of notice
Name of site	Governmental unit		
	OFFERINGIA GIN		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP C	Code		
وكالمداعة مدخمه الطرام الرامية المستمري المستقد ووالرام والأمراسي والأمراط والمرام والمرام والمهد والمرامة مع	a karanan sarah sarah sarah makan dagan dagam da	Stalibustinian in substante este i in instala grammanamina base est be el inis bota in l'ini in i	and the second of the second second
e you been a party in any judicial	or administrative proceeding under any enviror	nmental law? Include settlements ar	nd orders.
No			
Yes. Fill in the details.	e de la compaña de la comp	en e	anski kazona e ekster
	Court or agency No.	ature of the case	Status of the
Case title	·	asadaman karanta da ara a 1900 da aran da kada da aran da baram da baran da da aran da baran da da aran da da	
vase nue	Court Name		Pending
	:		On appe
	Number Street		Conclud
nin 4 years before you filed for ba	city State ZIP Code Ir Business or Connections to Any Busine ankruptcy, did you own a business or have any oloyed in a trade, profession, or other activity, eith	of the following connections to any	business?
Give Details About You nin 4 years before you filed for bath A sole proprietor or self-empled A member of a limited liability A partner in a partnership An officer, director, or manage	ar Business or Connections to Any Busine ankruptcy, did you own a business or have any oloyed in a trade, profession, or other activity, elty company (LLC) or limited liability partnership (ling executive of a corporation	of the following connections to any her full-time or part-time	business?
Give Details About You nin 4 years before you filed for bath A sole proprietor or self-empled A member of a limited liability A partner in a partnership An officer, director, or manage	ar Business or Connections to Any Busine ankruptcy, did you own a business or have any o loyed in a trade, profession, or other activity, eit y company (LLC) or limited liability partnership (of the following connections to any her full-time or part-time	business?
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Document Page 56 of 58 Maggie First Name Spivey Debtor 1 Case number (if known)_

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name		 EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State	ZIP Code	From To
NAT SERVICE AND ADMINISTRATION OF THE ACTION AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRATION AND ADMINISTRATION ADMINISTRATIO		
ithin 2 years before you filed t stitutions, creditors, or other	for bankruptcy, did you give a financial statement to anyone a parties.	bout your business? Include all financial
No		
Yes. Fill in the details below	V. ANDARONANIANA AMBARA	
	Date issued	
Name	MM / DD / YYYY	
Number Street		
Halliage Gueet		
	AMALIA 18 18 18 18 18 18 18 18 18 18 18 18 18	
City State	ZIP Code	
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Suite State		
12: Sign Below	is Statement of Financial Affairs and any attachments, and I de	eclare under penalty of periury that the
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Debtor 1	Maggie	M.	Spivey	
	First Name	Middle Name	Last Name	***************************************
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	***************************************
United States Case number (If known)	Bankruptcy Court for	the: Northern District	of Illinois	

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct Information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule Ca
Creditor's name: AllSteel Credit Union	☑ Surrender the property.	□ No
Description of Automobile: 2011 Chevy Malibu	Retain the property and redeem it.	ජ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
AMTION. SUBSECTION.		Yes
Description of Property Securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
ame:	Retain the property and redeem it.	☐ Yes
escription of roperty ecuring debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
reditor's	☐ Surrender the property.	☑ No
ame: Programme all as this knowledge of the constant of the constant of the association of the constant of the	Retain the property and redeem it.	☐ Yes
escription of roperty ecuring debt:	Retain the property and enter into a Reaffirmation Agreement.	·
•	Retain the property and [explain]:	

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Maggie

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Deblor 1

Case number (If known)

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

_essor's name: n/a	₩ No
	to a transfer of the contract
escription of leased roperty:	Yes
essor's name:	™ No
escription of leased roperty:	☐ Yes
essor's name:	No
rescription of leased roperty:	☐ Yes
essor's name:	₩ No
rescription of leased roperty:	Yes
essor's name:	☑ No
rescription of leased roperty:	Yes .
essor's name:	₩ No
escription of leased operty:	Yes
essor's name:	₩ No
escription of leased operty:	Yes